

Today, we're going to hear a lot of statistics and important calls to action. But as I thought about this discussion, one thing kept coming to mind: Everyone in this room personally knows someone who has struggled with drug addiction.

It is these brothers, sisters, parents, friends, neighbors, and co-workers we should use as our personal motivation for tackling the challenge of drug abuse and heroin deaths. I've know I've spent several decades trying to help a close friend who still struggles with his demons.

Look at how the profile of a heroin user has changed. A few decades ago, you'd look for a junkie in a low-income neighborhood; most likely it would be a man who started using in his teens. [A recent study in the Journal of the American Medical Association](#) tells us that the typical heroin addict today starts using, on average, at age 23. Today, it is more likely you'll find him – or her – in an affluent suburb, led to heroin through prescription painkillers. In fact, Baltimore County ranks fourth in the state for all intoxication deaths.

We had some success when we cracked down on doctors who were over-prescribing painkillers. It worked - pills were harder to get, but heroin was there to fill the need. Ironically, seemingly overnight, heroin became easier to get and much cheaper than Oxy.

This is what we are doing about it.

Baltimore County's plan is called "The New Deal,"

D.E.A.L. {Dr. Gregory Branch, our superb Director of Health and Human Services has a fondness for acronyms – and he's actually pretty good at it.}

D=Drug/Prescription Take Back Boxes

- Instead of occasional drop-off days, since September of 2013, we've made these Drug/Prescription Take Back Boxes available all year, 24/7, for anonymous drop off at all 10 of our Baltimore County Police precincts.
- We are targeting outreach efforts and media campaigns on opioid and prescription drug abuse to reach at risk populations. And, we're reminding parents to "lock it up; talk it up," advising them to talk with their kids about the proper use and dangers of medications.
- Our staff is spreading this message at events all around the County including Senior Expo, Back to School Nights, health fairs and festivals.

E= Educate and engage the prescribers, the treatment providers and the public.

- We work to educate physicians on screening, brief intervention, referral to treatment and safe prescribing practices. Baltimore County is included as one of the jurisdictions involved in a state initiative (over the next five years) to train Federally-Qualified Health Centers to screen for substance use disorders and refer to treatment.
- We have engaged all of our funded treatment providers, giving them education and training in providing appropriate opioid treatment.

A= Advocate for the use of Naloxone and appropriate treatment.

Up until last year, Naloxone was available only to Emergency Response Providers. Maryland law changed in 2014 to allow for others, including friends and family members to attain the medication.

- So, we advocate to the medical community for them to prescribe Naloxone to family, friends and those at risk of overdose.
- We advocate and assist with trainings to certify individuals to administer Naloxone. From June 2014 to April 2015 we've reached 239 individuals with free training sessions held throughout Baltimore County.

L=Lethality Review Team

- We're not done. We established a Lethality Review Team, composed of State and County partners, who will take a close look at overdose deaths and trends in Baltimore County. I look forward to their research-based recommendations for additional steps we can take to help prevent these tragedies.

Treatment

Another important element of solving the heroin problem is treatment. Using State and County funds, we are actively providing a wide array of treatment services to those who are uninsured. We anticipate receiving \$4 million to provide addiction treatment services FY 2016.

Baltimore County assisted with funding treatment for 1,656 adolescents and adults in Fiscal Year 2014 and we anticipate that our investment will be similar as we close out FY 2015.

Treating addiction successfully takes a very hands-on, personal approach. Our Department of Health secured a grant to hire “peer recovery specialists,” who help individuals get the treatment and recovery services they need, and encourage those who may not yet be ready to enter treatment.

We’ve hired 14 of these Peer Recovery Specialists. Four are working out of the Department of Health, three in treatment centers, and seven at Recovery Community Centers. So far, they have assisted more than 1,500 individuals and 200 families.

Bringing together resources, Baltimore County’s Health and Human Services department is working with our State partners, law enforcement, medical professionals, citizens groups, and directly with people struggling with drug addiction.

As you all know, addiction is a tremendously challenging, multi-faceted problem. There’s no silver bullet or simple answer. Just like it takes a village to raise a child, making real headway against heroin addiction and overdose takes shared commitment. We at Baltimore County are dedicated to working with our community and medical partners as well as our counterparts in state and local government to continue making progress against this heartbreaking disease.

I’m glad to have this opportunity to share with you what Baltimore County is doing to combat heroin addiction. And, I am very grateful to each of you for what you do every day to help our families deal with the painful challenges of addiction. Thank you very much.

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